

APPLICATION FOR PERMIT

TO APPROPRIATE PUBLIC WATERS OF THE STATE OF WASHINGTON

SURFACE WATER

GROUND WATER

\$10.00 MINIMUM STATUTORY EXAMINATION FEE REQUIRED WITH APPLICATION

(GRAY BOXES FOR OFFICE USE ONLY)

APPLICATION NO. W.R.	I.A. COUNTY	Glark		PRIORITY DATE	72 12:09	ACCEPTED
APPLICANT'S NAME - PLEASE PRINT	Hion	Truste	e \$	Hell	Bus. Tel.	
Olson Living Trust					Other Tel.	6)835-3
ADDRESS (STREET)	(CITY)	1 11-1		(STATE)	001	(ZIP CODE)
DATE & PLACE OF INCORPORATION IF APPLICANT IS A COR	PORATION	Washe	ugai	WA	986	11-7
1	SOURCE	E OF SUPPLY	¥			
IF SURFACE WATER	tion	E OF SOFT EF		IF GF	ROUND WATE	R
SOURCE (NAME OF STREAM, LAKE, SPRING, ETC.) (IF UNNA)	MED SO STATE	SOURCE (WEL	L, TUNNEL,	INFILTRATION T	RENCH, ETC.	
TRIBUTARY It is: I not an "action".		SIZE AND DEP	TH	0	1 2 1	
categorically exem	pt.	6" Ca	rsing	; Des	et 2/6	oft.
PATE STONASHER						
USE TO WHICH WATER IS TO BE APPLIED (DOMESTIC SUPPL		JSE MANUEACT	LIBING ETC	1		
Domestic Sun	1/4 4	Irrigat	L'on	for 6	sarden :	+ Low
ENTER QUANTITY OF WATER CUBIC FEET PER SEC REQUESTED USING UNITS OF:	OND (CFS)	OR GALLON	S PER MINL	JTE (GPM)	ACRE FEET PER	YEAR
11/		7	gue	Pau	W. +	
TIMES DURING YEAR WATER WILL BE REQUIRED		20	991	- IVEY	Minut	<u>e</u>
12 Months Year	Avo	und a	01	reede	ed)	
Trrigation o	f 6a	rden 4	- 60	wns	Sammi	er on
FIRRIGATION, NUMBER OF ACRES		SE, NUMBER OF , E.G. 1-HOME,	0	,	IF MUNICIPAL	USE ESTIMATE
ONE ACKE	MOBILE HOME	, 2-CAMPSITES, ETC.	OMPLETED	nome	POPULATION 20 YEARS FRO	OM TODAY
Project Start 1975	1 Con	pleted	1973		/	1
LOCATION (OF POINT	OF DIVERSION	/WITHDF	IAWAL		
OT BLOCK OF (GIVE NAME OF PLAT OR ADDITIO	N)	SECTION TO		ALOU, FLEA	SE ENCLOSE A CO	PY OF THE PLA
592-292		5/	N 4E	, MARK THE P	POINT(S) OF WITHDI	
					1	
IF NOT IN PLATTED PROPERTY ACCOMPANYING SECTION MAPS, ACCURATELY MARK A	AND IDENTIFY	EACH POINT OF DIV	/ERSION. SH	HOW		
RTH-SOUTH AND EAST-WEST DISTANCES FROM NEARES	T SECTION CO	RNER OR PROPERTY	CORNER	*		
300 FEET NOC. 1 - 900 FEE	1 4	ROPERTY CORNER	TO THE DIVE	1 3 .	Mer of S	5, 5
ATED WITHIN (SMALLEST LEGAL SUBDIVISION)	1	The state of the s	NSHIP N.	1 4 0 1	(E. OR W.) W.M.	COUNTY
SE 4 SE 14		5	/N		16	Clark
DO YOU OWN THE LAND ON WHICH THIS SOURCE IS LO	CATED. IF NOT,	INSERT NAME & ADI	DRESS OF O	WNER		
LEGAL DESCRIPTION C	OF PROPER	RTY ON WHICH	WATER	IS TO BE U	SED	
ACH A COPY OF THE LEGAL DESCRIPTION OF THE PRO EAL ESTATE CONTRACT, PROPERTY DEED OR TITLE IN	OPERTY (ON WE SURANCE POL	HICH THE WATER WILLICY. OR, COPY CARE	LL BE USED) FULLY IN TH	TAKEN FROM HE SPACE BELO	W.	
# 165 Sec 5 T	- 1 N/	R4F	WM			
1	1 //	11/2			A	
AKA LOT 1	SP 2	-292		6.32	4	
(See	o that	hel S	ho	t Pl	est)	
			- 7	·		
			i		LK	
						1. /
					FI	eld

APPLICATI

1-14

WHAT IS YOUR INTEREST IN THE PROPERTY C. WHICH THE WATER IS TO BE USED (PROPERTY OWNER, LESSE	E, CONTRACT PURCHASER, ETC.)
ARE THERE ANY EXISTING WATER RIGHTS RELATED TO THE LAND ON WHICH THE WATER IS TO BE USED (IN PROVIDED BY IRRIGATION DISTRICTS OR DITCH COMPANIES.)	CLUDING WATER YES NO
IF YES, FROM WHAT SOURCE (i.e. SURFACE OR GROUND WATER) AND UNDER WHAT AUTHORITY	Description of the Control of the Co
6. DESCRIPTION OF SYSTEM PROPOSED OR II	NSTALLED
(FOR EXAMPLE: SIZE OF PUMP, CAPACITY OF PUMP, PUMP MOTOR HORSE POWER, PIPE DIAMETER, NUMBER (One) / HP Submesible Pump	
CHE / III SUPMESIDIC FUMILY	1113441111
,	
REMARKS 7.	
8. COMPLETE THIS SECTION ONLY IF THIS	
APPLICATION INCLUDES IRRIGATION AS A L	SE
IN ORDER TO IMPLEMENT THE PROVISIONS OF INITIATIVE MEASURE NUMBER 59, THE FAMILY FARM WATER	ER ACT WHICH WAS PASSED BY THE VOTERS ON
NOVEMBER 3, 1977, WE MUST ASK THE FOLLOWING QUESTIONS: DOES THE TOTAL NUMBER OF ACRES IN WHICH YOU HAVE CONTROLLING INTEREST IN THE STATE OF WAS	HINGTON EXCEED 2000 ACRES FOR THE FOLLOW-
ING THREE CATEGORIES: 1. LANDS THAT ARE BEING IRRIGATED UNDER WATER RIGHTS ACQUIRED AFTER DECEMBER 8, 1977.	YES NO 🗵
2. LANDS THAT MAY BE IRRIGATED UNDER APPLICATIONS NOW ON FILE WITH THE DEPARTMENT OF ECOL	OGY. YES NO
3. LANDS THAT MAY BE IRRIGATED UNDER THIS APPLICATION.	YES LI NO LA
IF 10 ACRE-FEET OR MORE OF WATER IS TO BE STORED AND/OR IF THE WATER DEPTH W THE DEEPEST POINT, A STORAGE PERMIT MUST BE FILED IN ADDITION TO THIS PERMIT. THE TOGETHER WITH INSTRUCTIONS, FROM THE DEPARTMENT OF ECOLOGY.	
SIGNATURES	
2/\	A-11 80
first the second se	APPLICANT'S SIGNATURE
Olson Living Trust	+ nol Toute
A STATE OF THE STA	NDOWNER'S SIGNATURE (OWNER OF PROPERTY DESCRIBED IN ITEM NUMBER 5)
Vincent N. Olson Trustees 3520	SE STILES Rd.
Lillian L. Olson) Was	Haugal WA 98671
FOR OFFICE USE ONLY	
STATE OF WASHINGTON	
DEPARATMENT OF ECOLOGY	
This is to certify that I have examined this application together wi	In the accompanying maps and data,
and am returning it for correction or completion as follows:	
directions to property	•
In order to retain its priority date, this application must be returne	d to the Department of Ecology, with
corrections, on or before, 19, 19	
Witness my hand thisday ofday	, 19

Department of Ecology